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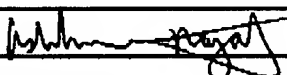
PTO/SB/21 (09-04)


Approved for use through 07/31/2006. OMB 0851-0031
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/623,334	
	Filing Date	07/12/2005	
	First Named Inventor	LAURA A. COSTA	
	Art Unit	3728	
	Examiner Name	BRYON P. GEHMAN	
Total Number of Pages in This Submission	2	Attorney Docket Number	TOR7024

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	LAW OFFICE OF ASHKAN NAJAFI, P.A.		
Signature			
Printed name	ASHKAN NAJAFI		
Date	07/18/2005	Reg. No.	48078

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I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
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Typed or printed name	AUGUST A. MAXEY	Date	07/18/2005

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PTO/SB/83 (04-05)

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**REQUEST FOR WITHDRAWAL
AS ATTORNEY OR AGENT
AND CHANGE OF
CORRESPONDENCE ADDRESS**

Application Number	10/623,334
Filing Date	07/12/2005
First Named Inventor	LAURA A. COSTA
Art Unit	3728
Examiner Name	BRYON P. GEHMAN
Attorney Docket Number	TOR7024

**To: Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450**

Please withdraw me as attorney or agent for the above identified patent application, and

- ☐ all the attorneys/agents of record.
- ☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or
- ☒ the attorneys/agents associated with Customer Number 34356

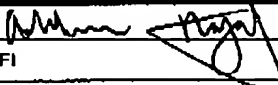
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The reasons for this request are:

**PATENT HAS BEEN GRATED, LEGAL SERVICES HAVE BEEN RENDERED PER CLIENT'S
ENGAGEMENT LETTER.****CORRESPONDENCE ADDRESS**

1. ☐ The correspondence address is NOT affected by this withdrawal.
2. ☒ Change the correspondence address and direct all future correspondence to:

☐ The address associated with Customer Number: **OR**

<input checked="" type="checkbox"/> Firm or Individual Name	LAURA A. COSTA			
Address	455 ROXTON ROAD			
City	TORONTO.	State		Zip M8G 3R5
Country	CANADA			
Telephone			Email	
Signature				
Name	ASHKAN NAJAFI		Registration No.	49,078
Date	07/18/2005		Telephone No.	(904) 296-0055

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

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